IS ENDOCRINOLOGY A NEW DEVELOPMENT?

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THE purpose of this article is to call attention to certain statements made in an extremely interesting and fascinating book, "The Children of Mu," by James Churchward.[1] I consider the quotation to be given of utmost importance, because, if authentic, it must occupy an important place in the history of medicine, and especially of endocrinology. The author of this book admits that the translation was extremely difficult, but he feels that all the essential details are right. Coming from a non-medical man, presumably not versed in modern endocrinology, it is difficult for me to conceive how such an interpretation could have been arrived at unless authentic. We must allow for the difficulty in choosing words to convey what the old Nascals may have meant, but the end-result certainly has a modern endocrine flavor. The reader may consult for himself the book and draw his own conclusions.

In the chapter dealing with "Stone Tablets from Mexico Valley" there are two paragraphs on "Color of Men's Skins," which are Mr. Churchward's translation of what the old Nascals were supposed to have said on this subject hundreds and hundreds of years ago. I offer the following quotation taken from pages 50-51, an extract from the Nascal writing as to "The Origin of Life and What Life Is":

"The cause and causes which have been instrumental in causing the color of men's skins to change are various, but the principal cause has been the unbalancing between the Life Force and the elementary compounds forming the skin. This unbalancing was the result of an over or an under stimulation of the glands which carry the Life Force in its secretion through the blood to the various parts of the body, including the skin. Each gland controls certain parts of the body and each gland has a normal volume of the Force which it causes. The secretions of the glands are governed by the character of the food, so that the food may produce either a surplus or a shortage of the Force used by a certain gland—in turn the Force carried by its secretions may either underbalance or overbalance the elementary compound it is controlling, resulting in irregularities of form or color or both in the elementary compound.

"The Life Force excites the cells to do their work. When there is an overplus of the Force the cells are unduly excited and work too fast and, on the contrary, when there is an unsufficient volume of the Force to form a balance, there are irregularities. The principal irregularities in man caused by these vital unbalancings are: size of body, character of hair, color of skin and sometimes change of features. The general cause of vital unbalancing is: character of food, combined with temperature."

Barring modern terminology, I do not think that the average medical man could give a much better discourse on this same subject. Remember that the above was written, presumably, hundreds of years ago.

[1] The Children of Mu. By James Churchward. Ives Washbrun, publisher, New York. 1931.

Comparison of Tuberculin Tests.—Aronson and his associates made a study of the relative sensitiveness of the Pirquet and the intracutaneous tuberculin tests in determining the incidence of tuberculous infection. For this purpose two large groups of white school children near Boston were tested simultaneously by the two methods. Of the children between the ages of five to nineteen years who failed to react to the Pirquet test, from 1.5 to 3.9 per cent, with an average of 2.9 per cent, reacted to 0.01 milligram of tuberculin. When one milligram of tuberculin was employed, the total of those who failed to react to the Pirquet test but reacted to the intracutaneous test ranged from 14.2 to 28.4 per cent, with an average of 19.1 per cent. The total of those who reacted to the intracutaneous test and not to the Pirquet test yielded a negligible increase in the amount of infection detected by this means. Those who failed to react to the Pirquet test, from 17.8 to 30 per cent, with an average of 22 per cent, reacted to the intracutaneous test with tuberculin. Repetition of the Pirquet test yielded a negligible increase in the amount of infection detected by this means. These observations were compared with two previous surveys of white school children, one made in Massachusetts with the Pirquet test, and the other made in Philadelphia with the intracutaneous test, which showed a higher incidence of infection in Philadelphia. Children in schools near Boston were found to have tuberculous infection less frequently than public school children in other parts of Massachusetts. In an institution near Boston the incidence of infection was higher than that of public school children. It was found that a mathematical factor, a "correction figure," could not be devised to convert results obtained by the one method into those obtained by the other.—*Amer. Rev. Tuberculosis.*

Loss of Weight in the Newborn.—Kugelmass and his associates point out that the initial loss in weight in the newborn can be prevented by the oral administration of a solution consisting of 6 per cent gelatin (*p*H 6.2), 3 per cent dextrose, and 0.5 per cent sodium chlorid at intervals of two hours throughout the twenty-four-hour cycle immediately after birth. The characteristic clinical picture of the newborn is a result of birth shock and is more effectively combated by a hydrating solution than by milk mixtures during the first two or three days of life. The total fluid intake of the newborn, properly conditioned to both the breast and the bottle, was as much as twice that of the series receiving the routine nursery care. Preventing the loss of weight in the newborn produces rapid disappearance of the so-called physiologic apathy, somnolence and stupor secondary to birth shock and the compensated acidosis universally present. The newborn infant shows a hypoglycemia during the first days of life and a sugar tolerance curve of low peak, thus indicating a dire need for carbohydrate as well as a tendency to utilize, store and exhaust their endogenous supply of carbohydrate more rapidly than older children. Determinations of the refractive index and viscosity of the serum of the newborn revealed the concentration of the blood on the first days of life, gradually attaining normal values following administration of food in the control series; but the newborn treated with the hydrating solution showed a markedly constant course for both refractive and viscosimetric curves. The gelatin component of the hydrating solution decreased the clotting time to less than three minutes, in comparison with seven minutes in the control series.—*American Journal of Obstetrics and Gynecology.*